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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: HUANG ET AL.
DOCKET NO.: A-7220
TITLE: APPARATUS FOR USING A RECEIVER MODEL TO MULTIPLEX
VARIABLE-RATE BIT STREAMS HAVING TIMING CONSTRAINTS

MARCH 13, 2001

REQUEST FOR DIVISIONAL APPLICATION UNDER 37 C.F.R. 1.60

BOX PATENT APPLICATION
Commissioner for Patents
Washington, DC 20231

This is a Request for filing a divisional application under 37 C.F.R. 1.53 of prior Application No. 09/322,555 filed May 28, 1999 entitled "APPARATUS FOR USING A RECEIVER MODEL TO MULTIPLEX VARIABLE-RATE BIT STREAMS HAVING TIMING CONSTRAINTS" by the following named inventor(s):

Full Name of Inventor:	Family Name Huang	First Given Name Si Jun	Second Given Name
Residence & Citizenship:	City Suwanee	State or Foreign Country Georgia	Country of Citizenship Singapore
Post Office Address:	Post Office Address 800 Yosemite Drive	City Suwanee	State & Zip Code/Country Georgia, 30174, United States of America

Full Name of Inventor:	Family Name Birch	First Given Name Christopher	Second Given Name H.
Residence & Citizenship:	City Toronto	State or Foreign Country Ontario	Country of Citizenship Canada
Post Office Address:	Post Office Address 275 Blythwood Road	City Toronto	State & Zip Code/Country .Ontario M4N 1A7 Canada

- ☒ Cancel in this application original claims 1-17 and 50-68 of the prior application before calculating the filing fee. At least one original independent claim is retained
- ☒ Enclosed is a true copy of the prior application as originally filed, including a copy of the executed oath or declaration, joint assignment and information disclosure statement which were filed at the same time.
- ☐ Please transfer the drawings from the prior application to the new application.

4. ☒ The filing fee is calculated on the basis of the claims existing in the prior application as modified by item 1 above.

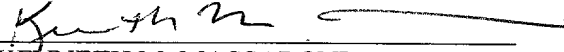
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL Claims	22	2	X \$ 18.00	\$036.00
INDEPENDENT Claims	1	0	X \$ 80.00	\$000.00
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			X \$270.00	\$270.00
BASIC FEE				\$710.00
TOTAL OF ABOVE CALCULATIONS				\$1016.00

5. ☒ Please charge Deposit Account number 19-0761 in the amount of \$1,016.00 for the filing fee. The Commissioner is hereby authorized to charge any underpayment or any additional fees associated with this application, or credit any overpayment, to this Deposit Account. A duplicate of this sheet is attached.
6. ☒ Amend the specification by inserting before the first line: "This application is a divisional of U.S. Serial No. 09/322,555 filed May 28, 1999."
7. ☐ A verified statement claiming shall entity status is of record in the application, submitted herewith.
8. ☐ Priority of Application Serial No. _____, in _____ is claimed under 35 U.S.C. 119.
9. ☒ The prior application is assigned to Scientific-Atlanta, Inc.
10. Also Enclosed: Copy of Original Revocation and Power of Attorney, Supplemental Information Disclosure Statements, 10 pages of formal drawings with transmittal

The undersigned states that the enclosed application papers comprise a true copy of the prior application as filed.

SEND CORRESPONDENCE TO:

Scientific-Atlanta, Inc.
Intellectual Property Dept. MS 4.3.518
5030 Sugarloaf Parkway
Lawrenceville GA 30044

By: 
KENNETH M. MASSARONI
Attorney of Record
Reg. No.: 33,015
Phone: (770) 33,015
Fax No.: (770) 236-4837

CERTIFICATE OF MAILING

EXPRESS MAIL NO.: EL745332925US

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as EXPRESS MAIL in an envelope addressed to:

BOX PATENT APPLICATION
Commissioner for Patents
Washington, DC 20231

on MARCH 13, 2001.



Marcia Burdick

UNITED STATES PATENT AND TRADEMARK OFFICE

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TRANSMITTAL of INFORMATION DISCLOSURE STATEMENT

BOX PATENT APPLICATION
Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith for filing in the above-identified patent application, please find:


1. X 2 Page Information Disclosure Statement
2. X Form PTO-1449
3. X Copy of Cited Art

In the event a fee is required, the Commissioner is hereby authorized to charge payment of any fees required in connection with this Information Disclosure Statement to our Deposit Account No. 19-0761. A duplicate copy of this letter is transmitted herewith.

Respectfully submitted:

SEND CORRESPONDENCE TO:

Scientific-Atlanta, Inc.
Intellectual Property Department
5030 Sugarloaf Parkway
Lawrenceville, GA 30044

By: 
KENNETH M. MASSARONI
Attorney of Record
Reg. No.: 33,015
Phone: (770) 236-4717
Fax No.: (770) 236-4806

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BIT STREAMS HAVING TIME CONSTRAINTS

MARCH 13, 2001

LETTER TO OFFICIAL DRAFTSPERSON

BOX PATENT APPLICATION
Commissioner for Patents
Washington, DC 20231


Dear Sir:

Transmitted herewith are 10 sheets of formal drawings for comparison, approval and filing in the above-identified application.

Respectfully submitted:

SEND CORRESPONDENCE TO:

Scientific-Atlanta, Inc.
Intellectual Property Dept. MS 4.3.518
5030 Sugarloaf Parkway
Lawrenceville, GA 30044

By: 
KENNETH M. MASSARONI
Attorney of Record
Reg. No.: 33,015
Phone: (770) 236-4717
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